

EXHIBIT F

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December 21, 2018

VIA Email Only

**Nate Crippes
Disability Law Center**

Re: Follow Up re KW Diabetes Management Issues

Dear Nate:

On behalf of Jordan School District, I believe we are close to being able to resolve the issues related to the management of K█████ W█████'s diabetes.

After a great deal of deliberation and further investigation, I can communicate that the District is in fact willing to reconsider its position regarding the necessity of storing KW's pre-filled insulin syringes in a lockbox in his medical bag. Although the District remains concerned about the safety considerations that have previously been communicated, and continues to believe those concerns are both reasonable and significant, it is also willing to consider alternatives short of locked storage.

Therefore, as we previously discussed, the only real remaining hurdle has to do with the language of the DMMO. As I had communicated in our phone conversation last month, although Dr. Murray's DMMO of November 21, 2018 adequately addressed the issue of the pre-filled syringes, the otherwise stock language of the DMMO is inappropriate in a couple of respects. I have attached a pdf with my notations regarding the language issues that remain to be resolved. Most significantly, based upon the language of the DMMO it is not clear that Dr. Murray understands that there will be no individual health care plan in place for K█████ where the family has declined to sign the required paperwork authorizing the provision of nursing services. This means that the only involvement of the school as it relates to the medical management of K█████'s diabetes would be with respect to the possible administration of emergency glucagon as per 53G-9-504.

The current DMMO expressly mentions an individual health care plan. However, an individual health care plan and associated nursing services/oversight is provided only under the supervision of a school nurse. We do not want there to be any ambiguity in the DMMO - from the District's perspective, its sole purpose is to certify that K█████ is

entirely capable of self-managing, and that it is therefore medically appropriate for him to be in possession of diabetes medication (including the pre-filled syringes and emergency glucagon) at all times.

My suggestion would be that you or the family provide my mark-up of the November 21, 2018 DMMO to Dr. Murray, and that if necessary, we schedule a conference call with you, me, and Dr. Murray to address any questions/concerns she might have about the clarifications being requested by the District. Once that is clarified, the District would like the final DMMO to be signed in ink, and mailed by Dr. Murray's office directly to the District, and not just delivered electronically.

Finally, I do also want to clarify that it is the District's ongoing understanding that those pre-filled syringes will be appropriately labeled by the pharmacy to indicate what they are filled with, and that if diluted insulin is used it will be diluted by the pharmacy. Again, those are important safety considerations because if there were ever an issue or problem with the inadvertent administration of insulin to another child or staff, the District would need to know exactly what is in the syringes and that it was prepared under the supervision of a licensed pharmacist.

If you and I can work on these final pieces over the holidays and get the revised orders then we can schedule a 504 Team meeting right away upon the start of school in January. The current 504 contains quite a bit of language regarding the medical management and oversight provided by the school so it will need to be modified fairly extensively in order to be consistent with this understanding.

Sincerely,

/s/ Joan M. Andrews

Joan M. Andrews
Counsel for Jordan School District

Encl. (DMMO Mark-Up)

♦ Final Report ♦

Utah Department of Health/Utah Office of Education
 Licensed Independent Provider's (LIP)
 Diabetes Medication/Management Orders
 In Accordance with Utah Code 53A-11-603 and 53A-11-604
 PCH Outpatient Diabetes Program

801-213-3599

Fax: 801-587-7539

Student Information

Patient First Name: K [REDACTED]

Patient Last Name: W [REDACTED]

Patient DOB: 03/03/2011

Type of DM: 1

Age at Dx: 17 months old

New statutory references:
 53G-9-504 (administration of
 glucagon);
 53G-9-508 (possession and
 self-administration of
 diabetes medication)

Name of School: Butterfield Canyon Elementary

School Fax:

For School Year: 2018-2019

To Be Completed by LIP

In accordance with these orders, an Individualized Health Care Plan (IHCP) must be developed by the School Nurse, Student, and Parent to be shared with appropriate school personnel, and cannot be shared with any individual outside of those public education employees without parental consent. As the student's LIP, I confirm Kraey has a diagnosis of diabetes mellitus and it is 'medically appropriate for the student to possess and self-administer diabetes medication and the student should be in possession of diabetes medications at all times' (Utah Code 53A-11-603 and 53A-11-604, section 2). Per my assessment, K [REDACTED] is capable to carbohydrate count meals and snacks for insulin adjustment, carry, and self-administer diabetes medication (prefilled insulin syringes). This student may participate in school activities with the following restrictions: Blood glucose is below 80 prior to PE/Recess.

School will not
 be responsible
 for oversight.

PROCEDURES

Emergency Glucagon Administration

Immediately for severe hypoglycemia: unconscious, semi-conscious (unable to control airway), or seizing.

Glucagon Dose: 0.5 mg/0.5 ml Route: IM Possible side effects: Nausea and Vomiting

Blood Glucose Testing

Target range for blood glucose (BG) is: 80-120

K [REDACTED] will independently check blood glucose as needed. (Before meals, prior to insulin correction, and before exercise). If BG is less than 80, he will treat himself.

I understand that the
 student's parent/guardian
 has declined to authorize
 nursing services and
 student will not receive
 services from, or other
 be under the supervision
 of a school nurse or other
 school personnel as
 relates to the management
 of student's diabetes.

Insulin Administration

Insulin Type: Diluted Novolog (2:10 dilution, prefilled syringe)

Novolin R (Regular, prefilled syringe)

Route: Subcutaneous Possible side effects: Hypoglycemia

Lunch Dosing: 0.5 unit Diluted Novolog and 1 unit Novolin R before meal (prefilled syringes).

K [REDACTED] will
 independently
 assess
 participation in
 PE/Recess
 based on blood
 glucose and will
 not participate if
 blood glucose is
 below 80 prior to
 PE/Recess.

Correction Dose: Diluted Novolog (prefilled syringe)

Blood Glucose 120-130 (0.5 unit)

Blood Glucose 130-140 (1 unit)

Blood Glucose 140-150 (1.5 unit)

Additional Orders:

The Dexcom G6 is FDA approved for making treatment decisions. Correction doses of insulin for hyperglycemia, or the intake of carbohydrates for treating or preventing hypoglycemia can be determined based on the CGM. The "Urgent Low Soon Alert" signifies that a glucose of 55mg/dL will be reached within 20 minutes. The parent/guardian must sign below verifying they approve of use of the G6 at school.

(Parent/Guardian Signature)

TO BE COMPLETED BY PARENT OR GUARDIAN

I understand that a school team, including parent or guardian, may make decisions about implementation and assistance in the school based on consideration of the above recommendations, available resources, and the student's level of self-management. I acknowledge that these orders signed by the LIP will be used by the school nurse, and shared with appropriate school staff, to develop and IHCP for my child's diabetes management at school.

Date:

Parent/Guardian Signature:

Best/Emergency contact information:

Name: Caly Watkins

Cell: 801-231-2855

Name: Wade Watkins

Cell: 801-450-3808

Name: Diane Ault

Cell: 801-694-5704

I acknowledge that these orders signed by the LIP will be shared with appropriate school staff in order to verify that my child is capable of self-managing his diabetes at school and does not require school nursing services.

Signature Line

Electronically Signed on 11/21/18 12:40 PM

MURRAY, MD, MARY A.

Result type:	School Records
Result date:	November 21, 2018 12:25 MST
Result status:	Auth (Verified)
Result title:	Free Text Note
Performed by:	MURRAY, MD, MARY A. on November 21, 2018 12:37 MST
Verified by:	MURRAY, MD, MARY A. on November 21, 2018 12:40 MST
Encounter info:	1216077479, PDBe_Diabetes, Clinic, 11/21/18 -